

CONFIDENTIAL RECORD SHEET  
DIVISION OF PERSONNEL  
B.S.A.

DATE \_\_\_\_\_

Full Name Iveans, Gerald D-----  
(No initials if you can possibly get full name)

Address HQs 87th ORD BN. APO-46 NEW YORK NEW YORK

City \_\_\_\_\_ State \_\_\_\_\_

Age 25 (This is important and should be exact)

Approximate age — (To be used ONLY when exact age is not known)

Religion PROTESTANT Nationality AMERICAN

Occupation MILITARY

Education HIGH SCHOOL

Weight 185 Color CAU. Height 5'9"

Color of hair BROWN Color of eyes BROWN

Outstanding characteristics or interests SPORTS CARS

Married or single SINGLE Children N/A  
(Number, ages, and names, if possible)

Wife's name N/A

SCOUTING CONNECTIONS:

Unit #	City	State	Office	Date Reg'd.	Date resigned
Troop 127	Nellingen	Ber. West	SCOUTMASTER	MARCH 63	DECEMBER 64
	Germany				

Special recognition HAS completed all requirements for SCOUTERS KEY - never presented -

Recommended for Confidential File for following reasons:

*See letter already sent.*

Signed \_\_\_\_\_

Scout Executive

GC-294-31

TSBSA010926

DYKES\_I\_012039

February 17, 1955

Mr. Robert C. Rusby  
Scout Executive  
Transatlantic Council, No. 802

PERSONNEL AND CONFIDENTIAL  
Re: Gerald D. Iveans  
Scoutmaster, Troop 127

Dear Bob:

Thank you for your letter of February 11th and the enclosed report concerning Gerald D. Iveans, Scoutmaster, Troop 127. We have placed this information in our file and have taken steps to have his name deleted from the Troop roster.

Enclosed is a confidential record sheet which we would appreciate your filling out and returning to us. This information will enable us to identify Mr. Iveans should he ever again attempt to register in the Scouting program.

Sincerely yours,  
PERSONNEL DIVISION

Howard Boyd  
Director of Registration

HB/clr  
Encl.

TSBSA010927

DYKES\_I\_012040

## APPLICATION FOR ADULT REGISTRATION

BOY SCOUTS OF AMERICA

NATIONAL COUNCIL

AUG 12 1963 J. TOMARE

THIS APPLICATION MUST BE FILLED OUT PERSONALLY BY EACH ADULT WHO IS NOT LISTED ON THE UNIT CHARTER APPLICATION OR COUNCIL ROSTER AND WHO:

- STATUS
1. Registers for the first time, regardless of position. (New) ☐
2. Has been separated and is reregistering. (Sep.-Re.) ☐
3. Is now registered in this council, separating from current position and transferring to new position. (Transfer)\* ☐
4. Is now registered in another council. (Transfer) ☒

## FOR OFFICE USE ONLY

REGION NO. <b>13</b>	COUNCIL NO. <b>802</b>	DISTRICT NO. <b>3</b>	TR (Type of unit) NATIONAL NO. <b>127</b>
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Note to Den Mother: Where both husband and wife are registered, both receive SCOUTING magazine. If you would rather that we leave your name off the mailing list, please check box at right. The registration fee is the same in either case. ☐

NO C. F. INFO.  
J. TOMARE

I hereby make application for registration with the Boy Scouts of America and subscribe to its Scout Oath and Scout Law and its declaration of religious principle as stated on reverse side of sheet. I agree, if a registration certificate is granted, to be guided by the Constitution and Bylaws of both the National Council and local councils and such rules and regulations as may be promulgated by them.

I transmit herewith \$1.00 membership fee for one year, (or a pro rata fee), half of which is to cover subscription to SCOUTING magazine for the period of my membership.

SIGNATURE OF APPLICANT

DATE 16 July 63

Name Gerald Evans  
(Please print or type full name)

Mailing address HQ 87th Ave  
APC 46 US

City CON State IA

Business phone \_\_\_\_\_  
Home phone \_\_\_\_\_

CHECKED BY \_\_\_\_\_  
DATE AUG 12 1963

To serve as Asst Scoutmaster  
(Position in unit or council)

Of Troop Local No. 127 OR Council name ADDRESS  
(Type of unit)

City Nellingen State Germany

From July 1963 To March 1964  
(Date of registration) (Expiration date of unit or council)

Occupation US Army Are you married? Yes ☐ No ☒

Age 23 U. S. citizen: Yes ☒ No ☐ OR Declaration of intention Yes ☒ No ☐

Have you an unexpired registration card? Yes ☒ No ☐ If so, where paid? Mount Rainier ADE  
(Name of council) (Unit number)

Have you been registered in Scouting in any adult capacity? Yes ☒ No ☐ What position? Cm - SM - ASM - NC - A

When and how long? 3 years Where? Mount Rainier

What is your religious preference? (See other side, Article IV) Protestant

APPROVED BY Donna Hiebert TITLE Asst Chairman  
(See "Approval" on other side) FOR MINOR SHELTON

## LOCAL COUNCIL APPROVAL

We hereby approve this person and recommend certificate be issued.

Date \_\_\_\_\_ Signed \_\_\_\_\_  
Scout Executive

\*NOTE: Please submit Separation Notice (No. 6108) for position individual is leaving.

## Check Adult Registration Fee Paid

<input type="checkbox"/> 1 mo. 10c	<input type="checkbox"/> 5 mo. 50c	<input type="checkbox"/> 9 mo. 90c
<input type="checkbox"/> 2 " 20c	<input type="checkbox"/> 6 " 60c	<input type="checkbox"/> 10 " 1.00
<input type="checkbox"/> 3 " 30c	<input checked="" type="checkbox"/> 7 " 70c	<input type="checkbox"/> 11 " 1.10
<input type="checkbox"/> 4 " 40c	<input type="checkbox"/> 8 " 80c	<input type="checkbox"/> 12 " 1.20

SEP 24 1963

SUBSCRIPTION

TSBSA010928

DYKES\_I\_012041

# APPLICATION FOR ADULT REGISTRATION

## BOY SCOUTS OF AMERICA

### NATIONAL COUNCIL

OCT 7 1963 J. TOMARE

## FOR OFFICE USE ONLY

THIS APPLICATION MUST BE FILLED OUT PERSONALLY BY EACH ADULT WHO IS NOT LISTED ON THE UNIT CHARTER APPLICATION OR COUNCIL ROSTER AND WHO:

- STATUS
1. Registers for the first time, regardless of position. (New) ☐
2. Has been separated and is reregistering. (Sep.-Re.) ☐
3. Is now registered in this council, separating from current position and transferring to new position. (Transfer)\* ☒
4. Is now registered in another council. (Transfer) ☐

REGION NO. <b>13</b>	COUNCIL NO. <b>802</b>	DISTRICT NO. <b>3</b>	TR (Type of unit) NATIONAL NO. <b>127</b>
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I hereby make application for registration with the Boy Scouts of America and subscribe to its Scout Oath and Scout Law and its declaration of religious principle as stated on reverse side of sheet. I agree, if a registration certificate is granted, to be guided by the Constitution and Bylaws of both the National Council and local councils and such rules and regulations as may be promulgated by them. I transmit herewith \$1.00 membership fee for one year (or a pro rata fee), half of which is to cover subscription to SCOUTING magazine for the period of my membership.

SIGNATURE OF APPLICANT

DATE **4 Sep 63**

Name Gerald Ivers (Please print or type full name)

Mailing address HQ 87th Ord Bn Business phone 727

City APO 46 Home phone \_\_\_\_\_ State US Forces

To serve as Scoutmaster (Position in unit or council)

Of Troop Local No. 127 OR Council name Transatlantic

City Nellingen State Germany

From 3 Sept 60 To 31 March 64

(Date of registration) (Expiration date of unit or council)

Occupation US Army Are you married? Yes ☐ No ☒

Age 23 U. S. citizen: Yes ☒ No ☐ On expiration of intention Yes ☐ No ☐

Have you an unexpired registration card? Yes ☒ No ☐ If so, where paid? Transatlantic (Name of council) +127 (Unit number)

Have you been registered in Scouting in any adult capacity? Yes ☒ No ☐ What position? Asst SM +127

When and how long? Transatlantic Council Aug-Sep 63 Mount Rainier Council Where? 60-63

What is your religious preference? (See other side, Article IV) Protestant (First Christian)

APPROVED BY

Dwight M. Sheldon

TITLE

Com Chm

## LOCAL COUNCIL APPROVAL

We hereby approve this person and recommend certificate be issued

Date

Signed

Scout Executive

\*NOTE: Please submit Separation Notice (No. 6108) for position individual is leaving.

## Check Adult Registration Fee Paid

- |                                    |   |                                      |
|------------------------------------|---|--------------------------------------|
| <input type="checkbox"/> 1 mo. 10c | <input type="checkbox"/> 5 mo. 50c          | <input type="checkbox"/> 9 mo. 80c   |
| <input type="checkbox"/> 2 " 20c   | <input checked="" type="checkbox"/> 6 " 60c | <input type="checkbox"/> 10 " 90c    |
| <input type="checkbox"/> 3 " 30c   | <input type="checkbox"/> 7 " 60c            | <input type="checkbox"/> 11 " \$1.00 |
| <input type="checkbox"/> 4 " 40c   | <input type="checkbox"/> 8 " 70c            | <input type="checkbox"/> 12 " \$1.00 |

D.R.N. SENT M.P. OCT 7 1963

STENCIL SERVICE

TSBSA010929

DYKES\_I\_012042



# TRANSATLANTIC COUNCIL

## BOY SCOUTS OF AMERICA



11th February, 1965

Mr. Delmer H. Wilson  
Director of Personnel  
Boy Scouts of America  
National Council  
New Brunswick, New Jersey

Dear Skipper,

Attached is a report from Captain James K. Traugher, M.P. Station Commander, on Gerald D. Iveans, SP4 involving a morals charge. SP4 Iveans is now registered as Scoutmaster of Troop 127 of this council. From the information received from this report and the subsequent investigation by district executive Mr. Richey, we recommend that this man be placed on the confidential file. We have deleted this man from our records.

Sincerely yours,

ROBERT C. RUSBY  
Scout Executive

enc:  
RCR/TAK

Office: Czernyring Shopping Center, Heidelberg, Germany  
Mail Address: APO 403, New York, N.Y. (US Forces)  
Phone: Heidelberg Mil 8201  
Council No. 802

TSBSA010930

DYKES\_I\_012043



OBSCEU

<b>MILITARY POLICE REPORT</b> (AR 190-43)		DATE <b>17 Dec 64</b> <b>12 # 16</b>	INFORMATION/COMPLAINT NR <b>STOT-4399-64</b> <b>(12 # 16, 22 Nov 64)</b>	MPCL REPORT NR (For cross reference)
THRU: <b>TO: <del>ALL DISTRIBUTION</del></b>		FROM: <b>STOUTHART STATION</b> <b>APO 154-03, FINCH</b>		
1. <del>XXXXXXXXXXXX</del> <b>XXXXXXXXXXXX</b> <b>IVANS, Gerald D</b> <b>SP4</b>		2. SERVICE NUMBER <b>BA 19 613 039</b>	3. ORGANIZATION (Include location & tel nr) <b>BA Co, 87th Ord Bn, APO 46</b>	
4. DESCRIPTION (Complete on all civilians and military personnel whose identity is in question)				
COLOR OF EYES	COLOR OF HAIR	COMPLEXION	AGE	WEIGHT
5a. DRESS	b. CONDITION	c. BEHAVIOR	d. UNDER INFLUENCE OF (Check appropriate box)	
UNIFORM	CLEAN	COOPERATIVE	<input type="checkbox"/> ALCOHOL	
CIVILIAN CLOTHING	DIRTY	UNCOOPERATIVE	<input type="checkbox"/> OTHER (Explain)	
	HEAT	INTELLIGENT		
	MUSSED			
5. COMPLAINT (Specify time and location) <b>BODILY.</b> <b>1001 Bay Scouts Camping site near Fanner Line, Doeblingen, Ger.</b> <b>13-21 Nov 64</b>				
6. RECEIVED BY (Typed or printed name, grade, and position) <b>Sgt James G Muldon, 1st Sgt, 52nd MP Bn.</b>				
7. DETAILS OF INFORMATION ON COMPLAINT (WHO, WHAT, WHEN, WHERE, HOW AND WHY. Continue in REMARKS on reverse side. Attach statements of personnel related to report, if appropriate.) <b>Reference Case # STOT-4399-64, dated 22 Nov 64. This offense - Investigation disclosed that IVANS committed the offenses as alleged by KUNZEL, however, he denied he had intentionally furnished the private parts of [REDACTED]. He did admit that he had kissed the child several times but only on the cheek and this, only in a friendly and affectionate manner. On 27 Nov 64, IVANS was examined by a psychiatrist and it was found</b>				
8. EVALUATION: <input type="checkbox"/> UNFOUNDED <input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> FELONY <input type="checkbox"/> MILITARY OFFENSE <input type="checkbox"/> TRAFFIC				
9. PERSONS RELATED TO REPORT (Insert category of relationship with offender opposite name. Continue on reverse side.)				
A. COMPLAINANT	B. VICTIM	C. SUSPECT	D. WITNESS	E. MIL POLICE
NAME		GRADE	SERVICE NUMBER	ORGANIZATION OR ADDRESS
A. <b>KUNZEL, Hans</b>		<b>1st Sgt</b>	<b>BA-1500379</b>	<b>14th ATC, APO 46</b>
B. <b>KUNZEL, Hans F. Jr.</b>		<b>1st Sgt</b>	<b>BA-1500379</b>	<b>14th ATC, APO 46</b>
C. <b>WHITTE, Joseph B</b>		<b>Investigator</b>	<b>52nd MP Bn (CI), APO 154</b>	
D. <b>MULDON, Robert F</b>				
10. DISPOSITION OF: INFORMATION/COMPLAINT (See 4.) OFFENDER (See 4.) EVIDENCE (See 4.)				
A. REFERRED TO:		C. EVIDENCE		
PATROL		STOT MP STJ		
MPCL (See report number at top of page)		File		
OTHER AGENCY (Specify)		DEC 24 1964		
NONE		Not Statistically recorded		
B. OFFENDER		D. EVIDENCE		
INCLOSURES (Statements and receipts)		FOR THE COMMANDER (Strike out if inapplicable)		
DISTRIBUTION:		TYPED NAME, GRADE, AND TITLE OF REPORTING OFFICER		
1- GO Unit		<b>JAMES K. TRAUGHER</b>		
1- 7th Army		CAPTAIN		
1- 7th USACOM		MPCL TIME		
2- VII North		MP STATION COMMANDER		
1- File		DATE		

DA FORM 19-32

OBSCEU

TSBSA010931

DYKES\_I\_012044

COMMANDER'S REPORT OF DISCIPLINARY ACTION TAKEN. (To be completed by the CO of the offender when the reverse side of this form indicates that disposition information is desired. Indicate actions in Items 4 and 5, if applicable, and explain as required in Item 6. Forward through command channels within TEN days of receipt of the report. To facilitate transmission, turn this side face up when returning correspondence through message center.)										DATE	
THRU:						FROM:					
TO:											
1. OFFENDER						2. GRADE		3. SERVICE NUMBER			
4. ACTION						5. COURTS-MARTIAL					
ADMINISTRATIVE		NON-JUDICIAL		JUDICIAL		SUMMARY		SPECIATE		GENERAL	
				PENDING (Charges forwarded)	COMPLETED	PENDING	TRIAL COMPLETED	PENDING	TRIAL COMPLETED	PENDING	TRIAL COMPLETED
6. DETAILS											
TYPED NAME & GRADE OF COMMANDING OFFICER						SIGNATURE					
REMARKS											
<p>Block # 8, page # 1, continued.</p> <p>recommended that he be separated from the US Army under the provisions of AR 675-89. The Commanding Officer, Bn Co, 67 Ord Bn, APO 44, requested that the incident be handled by the unit in order to expedite action under AR 675-89. Concurrence of the Chief Investigator, 52nd MP Det (CI), APO 44, was obtained. This case is closed in the files of this office.</p> <p style="text-align: center;"><b>THIS IS A FINAL REPORT.</b></p>											

TSBSA010932

DYKES\_I\_012045